



# Howard County

## RECREATION & PARKS

7120 Oakland Mills Road, Columbia, Maryland 21046

### Therapeutic Recreation Inclusion Opportunities (TRIO) Authorization Agreement for Pre-arranged Payments

Phone: 410-313-7275 (voice/relay)

Fax: 410-313-4658

www.howardcountymd.gov/rap

## AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS

Please complete and return this form  
to Registration by one of the following:



Registration@howardcountymd.gov



7120 Oakland Mills Road  
Columbia, MD 21046



410-313-4660

### Participant Information (please print)

Participant's Name

Location

Participants complete home address if different from payer.

### Payer Information (please print)

(The payer must also be one of the responsible parties who have signed the Parent Contract and payment account holder)

Payer Name

Relation to Participant

Email Address

Home Street Address

(Address should match the address on the account)

City/State

Zip Code

Daytime Phone

Evening Phone

Additional Email Address

## AUTOMATIC PAYMENT INFORMATION

Automatic payments are a convenient way of making sure your payment is received on time.

By signing and dating below, I hereby authorize Howard County Recreation & Parks to effect payment for my reoccurring childcare fees automatically on the 17th of each month. I understand this agreement will remain in effect until I have notified the Department of Recreation & Parks, in writing, of my desire to terminate this agreement, at least (5) five business days prior to the next scheduled payment due date.

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Credit Card Payment



Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Credit Card Holder Signature

Date

Credit Card Holder Name (Print)

(CVC Code: 3-digit number on the back of card, or for American Express, 4-digit number on front of card.)

#### Electronic Check Payment

☐ Checking☐ Savings

Routing # \_\_\_\_\_ Account # \_\_\_\_\_

Account Holder Signature

Date

Account Holder Name (Print)



Routing Number

Account Number

### Late Pick-Up Fees

I hereby authorize Howard County Recreation & Parks to effect payment of any Late Pick-Up that occurs during the school year using the account information on-file. I am aware my child(ren) may be suspended from the program if this occurs more than 4 times in the year.

Account Holder Signature

Date